PTO/SB/08A (08-03)

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Attorney Docket Number

INFORMATION	DISCLOSURE

Substitute for form 1449/PTO

Sheet 1

STATEMENT BY APPLICANT (Use as many sheets as necessary)

of 2

Complete if Known			
Application Number	10/661,159		
Filing Date	09-12-2003		
First Named Inventor	Vargas		
Art Unit			
Examiner Name			

				DOCUMENTS		
Examiner Cite No.1		Document Number Number-Kind Code ^{2 (7 Incom)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Oocument	Pages, Columns, Lines, Wher Relevant Passages or Relevan Figures Appear	
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Examiner Cite Foreign Patent Document Initials* No.1	Cite Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages		
		Country Code ³ Number ⁴ Kind Code ⁵ (# known)	MM-DD-YYYY		Or Relevant Figures Appear	L
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Examiner Signature	Filh	Date Considered	02.10-2006

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	Substitute for form 1449/PTO	Co.	Complete if Known			
Substitute for form 144	9/10	Application Number	10/661,159			
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INFORMATION DISCLOSURE STATEMENT BY APPLICANT	i i i i i i i i i i i i i i i i i i i	Vargas				
	Art Unit					
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Sheet 2	of 2	Attorney Docket Number				

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Examiner Cite Initials* No.1	Cite No.1	. Document trains	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevan Figures Appear	
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